



Bridgeport Ethanol, LLC
 9216 County Rd 90
 Bridgeport, NE 69336

APPLICATION FOR EMPLOYMENT

PERSONAL INFORMATION

NAME: _____ SOCIAL SECURITY # _____
 Last First Middle
 CURRENT ADDRESS: _____
 Street City State Zip Code
 PREVIOUS ADDRESS: _____
 Street City State Zip Code
 DAY TIME PHONE: _____ EVENING PHONE: _____
 HAVE YOU EVER WORKED FOR BRIDGEPORT ETHANOL? YES _____ NO _____ IF YES, WHEN? _____

EMPLOYMENT INTEREST

POSITION YOU ARE APPLYING FOR: _____ DATE YOU CAN START: _____
 TOTAL NUMBER OF HOURS DESIRED PER WEEK: _____ EXPECTED WAGE: _____
 TYPE OF EMPLOYMENT DESIRED PER WEEK: Full Time Part Time Temporary

DAYS AND TIMES AVAILABLE (INDICATE A.M. AND/OR P.M.)

SUNDAY MONDAY TUESDAY WEDNESDAY THURSDAY FRIDAY SATURDAY

FROM:

TO:

EDUCATION

HIGH SCHOOL OR GED LAST YEAR COMPLETED: 9 10 11 12
 COLLEGE/ UNIVERSITY LAST YEAR COMPLETED: 1 2 3 4
 DEGREE RECEIVED: _____
 OTHER EDUCATION/ TECH. SCHOOL LAST YEAR COMPLETED: 1 2 3 4
 DEGREE RECEIVED: _____
 DESCRIBE ANY EXTRACURRICULAR ACTIVITIES, CLUB, HOBBIES, ETC.: _____

GENERAL INFORMATION

ARE YOU 18 YEARS OF AGE OR OLDER? YES _____ NO _____
 DO YOU HAVE ACCESS TO SOME RELIABLE FORM OF TRANSPORTATION?
 YES _____ NO _____ IF YES, WHAT TYPE? _____
 IF EMPLOYMENT IS OFFERED, CAN YOU SUBMIT VERIFICATION OF YOUR LEGAL RIGHT TO WORK IN THE
 UNITED STATES? YES _____ NO _____
 HAVE YOU EVER BEEN CONVICTED OF ANY CRIME, INCLUDING A MISDEMEANOR AND/OR FELONY, IN THE
 PAST SEVEN YEARS? YES _____ NO _____
 IF YES, FOR WHAT OFFENSE(S) HAVE YOU BEEN CONVICTED?
 WHEN AND WHERE? _____

NOTE: The existence of a conviction record(s) does not constitute an automatic bar to employment. Your conviction record(s) will be considered only as it may substantially relate to the job for which you are applying.

ARE YOU BOUND BY A NON-DISCLOSURE OR NON-COMPETE CONTRACT? YES _____ NO _____

EMPLOYMENT HISTORY

PRESENT OR LAST EMPLOYER: _____
 ADDRESS/CITY/ZIP CODE: _____
 TELEPHONE NUMBER(S): _____
 SUPERVISOR: _____ TITLE: _____
 DATE EMPLOYED(Mo/Yr): FROM _____ TO _____
 HOURLY RATE/SALARY: STARTING _____ FINISH _____
 EMPLOYMENT STATUS: FULL TIME _____ PART TIME _____
 REASON FOR LEAVING: _____
 JOB DESCRIPTION/RESPONSIBILITIES: _____

PAST EMPLOYER: _____
ADDRESS/CITY/ZIP CODE: _____
TELEPHONE NUMBER(S): _____
SUPERVISOR: _____ TITLE: _____
DATE EMPLOYED(Mo/Yr): FROM _____ TO _____
HOURLY RATE/SALARY: STARTING _____ FINISH _____
EMPLOYMENT STATUS: FULL TIME _____ PART TIME _____
REASON FOR LEAVING: _____
JOB DESCRIPTION/RESPONSIBILITIES: _____

PAST EMPLOYER: _____
ADDRESS/CITY/ZIP CODE: _____
TELEPHONE NUMBER(S): _____
SUPERVISOR: _____ TITLE: _____
DATE EMPLOYED(Mo/Yr): FROM _____ TO _____
HOURLY RATE/SALARY: STARTING _____ FINISH _____
EMPLOYMENT STATUS: FULL TIME _____ PART TIME _____
REASON FOR LEAVING: _____
JOB DESCRIPTION/RESPONSIBILITIES: _____

ADDITIONAL INFORMATION

With regards to the position you are applying for, please list any other equipment you can operate, skills you have, or duties you have performed that would be beneficial.

PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY

*In consideration of my employment , I agree to conform to the policies and procedures of Bridgeport Ethanol LLC. I understand that in accepting this application, Bridgeport Ethanol LLC is in no way obligated to accept employment if offered. Furthermore, if employed, I understand that I am employed at will and that my employment and compensation can be terminated with or without cause and with or without notice at any time.

*I certify that the facts contained in this application are true and complete to the best of my knowledge. I understand that any falsified statements on this application or omission of fact on either this application or during the pre-employment process will result in my application being rejected, or if I am hired, in my employment being terminated.

*I also understand that any offer of employment is conditioned on the completion of pre-employment tests and documentation. I will upon request, sign all necessary consent forms.

*I hereby authorize Bridgeport Ethanol LLC to request information including but not limited to my previous employment, educational verification, social security verification and other information bearing on my character, general reputation, personal and professional characteristics, and trustworthiness. I hereby release Bridgeport Ethanol LLC, its agents and all entities providing information about me from any and all liability arising out of the request.

DATE _____ SIGNATURE _____

Drug Testing

I understand that all prospective employees must submit to a controlled substance test upon a conditional offer of employment. A urine specimen will be collected at a collection site selected by Bridgeport Ethanol LLC and tested for controlled substances at a DHHS/SAMSHA-certified laboratory. I understand that if I decline to sign this consent and thereby decline to take the test, the conditional offer of employment will be withdrawn.

I hereby agree to voluntarily submit to a controlled substance test and further understand that if said test is verified as positive, that I will be considered unqualified for employment by Bridgeport Ethanol LLC.

DATE _____ SIGNATURE _____